

## BESTMED MEDICINE FORMULARY FOR CDL-CHRONIC (CHRONIC DISEASE LIST) CONDITIONS

- Benefits are subject to the following:
  - ✓ Pre-authorisation
  - ✓ Bestmed guidelines
  - ✓ Bestmed protocols
    - Below medicines are first line treatment. Second line medicines not listed, would be considered if clinical funding criteria is met as per protocol – without penalties.
  - ✓ Mediscor Reference Price (MRP)

This price represents the reasonable price in the market place for a particular group of generic equivalent medicines which is reviewed and updated regularly. MRP sets a maximum reimbursable price for a list of generically similar medicines with a cost lower than that of the original medicine. There may be instances where a generic alternative costs more than the set MRP. If you opt to use the original medicine and a generic alternative is available, or you use a medicine that costs more than the MRP, you will have to pay the difference between the price of the chosen medicine and that of MRP.
- This formulary is effective from 1 January 2026.
- This formulary is subject to change without notice.
- **ONLY the following medicine classes will be considered for Beat1, Beat2 and Rhythm1:**
  - ✓ Alkylating agents
  - ✓ Aminoquinolines
  - ✓ Corticosteroids
  - ✓ COX inhibitors
  - ✓ Cytostatic
  - ✓ Folic acid
  - ✓ Platelet aggregation inhibitors
  - ✓ Zinc formulations

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**YES** = formulary

**NO** = non-formulary with co-payment (CO-PAY)

**NO BENEFIT** = excluded\*

\*Possible funding without penalty, if first and second line treatment failed.

## SYSTEMIC LUPUS ERYTHEMATOSUS

ACTIVE INGREDIENT	BEAT1/BEAT 1 Network	BEAT2/BEAT 2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
<b><u>A</u></b>										
ASPIRIN 81MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
ASPIRIN 100MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ASPIRIN 300MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
AZATHIOPINE 50MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b><u>B</u></b>										
BECLOMETHASONE CREAM	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
BETAMETASONE CREAM	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
BETAMETASONE LOTION	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
BETAMETASONE OINTMENT	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
BETAMETASONE SCALP APPLICATION	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b><u>C</u></b>										
CHLOROQUINE 200MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES

ACTIVE INGREDIENT	BEAT1/BEAT 1 Network	BEAT2/BEAT 2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
CLOBETASOL CREAM	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
CLOBETASOL OINTMENT	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
CYCLOPHOSPHAMIDE 50MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b>D</b>										
DICLOFENAC SODIUM 25MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
DICLOFENAC SODIUM 50MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
DICLOFENAC SODIUM SR 75MG	NO 30% CO-PAY	NO 30% CO-PAY	NO 30% CO-PAY	YES	NO 25% CO-PAY	YES	YES	YES	NO 30% CO-PAY	NO 30% CO-PAY
DICLOFENAC SODIUM SR 100MG	NO 30% CO-PAY	NO 30% CO-PAY	NO 30% CO-PAY	YES	NO 25% CO-PAY	YES	YES	YES	NO 30% CO-PAY	NO 30% CO-PAY
<b>E</b>										
FOLIC ACID 5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
FLUOCINOLONE CREAM	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
FLUOCINOLONE GEL	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
FLUOCINOLONE OINTMENT	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES

ACTIVE INGREDIENT	BEAT1/BEAT 1 Network	BEAT2/BEAT 2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
<b>H</b>										
HYDROCORTISONE CREAM	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
HYDROCORTISONE OINTMENT	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b>I</b>										
IBUPROFEN 200MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
IBUPROFEN 400MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
IBUPROFEN SUSPENSION 100MG/5ML	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
INDOMETHACIN 25MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b>M</b>										
MELOXICAM 7.5MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
MELOXICAM 15MG	NO 30% CO-PAY	NO 30% CO-PAY	NO 30% CO-PAY	YES	NO 25% CO-PAY	YES	YES	YES	NO 30% CO-PAY	NO 30% CO-PAY
METHOTREXATE 2.5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
METHOTREXATE 50MG/5ML INJ	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
METHOTREXATE 500MG/20ML INJ	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES

ACTIVE INGREDIENT	BEAT1/BEAT 1 Network	BEAT2/BEAT 2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
<b><u>P</u></b>										
PREDNISONE 5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
<b><u>Z</u></b>										
ZINC PREPARATION CREAMS	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ZINC PREPARATION OINTMENT	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES